

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: 09/576676

Total Fee Calculations

Fee Code	Total # Claims	Number Type	X	Fee	Fee = Total
Basic Filing Fee	<u>100/100</u>			<u>690</u>	<u>690</u>
Total Claims > 3	<u>200/100</u>	<u>27</u>	<u>7</u>	<u>18</u>	<u>126</u>
Independent Claims > 3	<u>200/100</u>	<u>3</u>	<u>—</u>	<u>—</u>	<u>—</u>
Multi Dep. Claim Increase	<u>244/100</u>			<u>—</u>	<u>—</u>
Surcharge	<u>200/100</u>			<u>—</u>	<u>—</u>
English Translation	<u>100</u>			<u>—</u>	<u>130</u>
<u>TOTAL FEE CALCULATION</u>					<u>946</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 946.00

Less Filing Fees Submitted = \$ —

BALANCE DUE = \$ 946.00

Jeff Dahl
Office of Initial Patent Examination